FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT AS FILED DEP. IND. IND. IND. DEP. IND. DEP. DEP. IND. DEP. IND. DEP. _13

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT of COMMERC

TOTAL

TOTAL DEP.

OTAL

OTAL EP.

OTAL